



Application for a Water Right Permit

For Ecology Use
(Date Stamp)

13 JAN 30 A9:19

DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

- ☐ GROUND WATER ☒ SURFACE WATER
☒ PERMANENT ☐ SHORT TERM ☐ TEMPORARY
☐ DROUGHT

*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

- ☐ I have participated in a pre-application conference with Ecology.

Applicant/Business Name: JOHN ADOLFSON	Phone No: 509-533-9944	Other No: 509-209-1548
Address: 1704 E. 19TH AVE		
City: SPOKANE	State: WA.	Zip: 99203
Email Address (if available): adolfson.j@gmail.com		

Contact Name (if different from above):	Phone No:	Other No:
Relationship to Applicant:		
Address:		
City:	State:	Zip:
Email Address (if available):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: JOHN & JEANNE ADOLFSON	Phone No: 509-533-9944	Other No: 509-209-1548
Address: SAME AS ABOVE		
City:	State:	Zip:
Email Address (if available):		

For Ecology Use	APPLICATION NO: _____	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____ By _____
WRIA: _____		
Pre-application interviewer: _____		

Section 2. STATEMENT OF INTENT

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO
If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Briefly describe the purpose of your proposed project: WATER FOR EVENTUAL HOME
AND GARDEN

Domestic supply & irr. of 1 acre

Anticipated length of time to complete your project: 5 YRS

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
<u>SPRING (Unnamed)</u>	<u>10</u>	<u>0.04 CFS</u>	<u>1</u>	<u>CONTINUOUS</u>
<u>REVER Pend Oreille</u>	<u>10</u>		<u>3</u>	<u>SEASONAL</u>
TOTAL:		<u>0.04</u>	<u>4</u>	

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL

(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
<input checked="" type="checkbox"/> Spring <input type="checkbox"/> Creek <input checked="" type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: <u>UNNAMED SPRING</u> <u>PEND OREILLE REVER</u>	Well diameter & depth: _____
Tributary to: _____	Number of proposed points of withdrawal: _____
Number of proposed diversion points: <u>(2)</u>	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If available, attach Water Well Report and pump test.
	Well Tag ID No. _____

C.) Point of Diversion/Withdrawal – Legal Description						
Parcel No.	¼	¼	Section	Township	Range	County
43-38-05-06-000	SE ¼	SE ¼	5	38	43	PANA ORELLA
Lot(s)	Block(s)		Subdivision			
Gov't Lot 6						

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
 _____ Feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
 from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
 _____ feet (☐ North/☐ South) and _____ feet (☐ East/☐ West)
 from the (☐NW ☐SW ☐NE ☐SE ☐) corner of Section _____.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

GOVERNMENT LOT 6 IN SECTION 5, TOWNSHIP 38 NORTH, RANGE 43 EAST OF THE WILLAMETTA MERIDIAN, PANA ORELLA COUNTY, STATE OF WASHINGTON.						
¼	¼	Section	Twp.	Range	County	Parcel No.

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☐ YES ☒ NO

If yes, provide the water right and/or claim numbers: _____

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

SEE ENCLOSURE

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source):

A GAS OPERATED PUMP WELL DRAW WATER FROM THE RIVER TO A DRUM ON THE BUILDING SITE.

A CISTERN TYPE WELL WILL BE DUG AND LINED WITH ROCK TO CAPTURE SPRING WATER WHICH WILL BE PUMPED WITH A GAS POWERED PUMP TO AN ELEVATED DRUM AT THE BUILDING SITE.

1/2" DIAMETER GARDEN HOSE WILL TRANSPORT THE WATER.

PUMP IS 79CC GASOLINE POWERED WITH 37 GPM DISCHARGE CAP. IT WILL PUMP THROUGH 1/2" DIAMETER HOSE TO TWO 110 GALLON WHITE

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>2</u>	Present population to be served water: _____
Type of connections: <u>CABIN AND GARDEN</u> (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____ _____ _____ _____ _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 1 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: LARGE VEGETABLE GARDEN AND FRUIT TREES.

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: TAKE LEHIGH HILL ROAD
TO THE SOUTH EAST OUT OF METALINE FALLS.
THE ROAD WILL BECOME A PRIMITIVE ROAD
GOING DOWN TOWARDS RIVER. CROSS RR TRACKS TO
THE LEFT AND KEEP ON PRIMITIVE ROAD CROSSING
RR. TRACKS 2 MORE TIMES. UPON THE 2ND CROSSING
YOU WILL BE ON OUR PROPERTY. CONTINUE PAST CLEARING
TO CAMP TRAILER. TO THE S.W. OF CAMP TRAILER IS

Site Address: _____

ACCESS TO OLD LOGGING ROAD WHICH ENDS AT PROPOSED
SPRING AND RIVER SITE.

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

JOHN ADOLFSON
Print Name
(Applicant or authorized representative)

[Signature]
Signature

1-28-13
Date

Same
Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

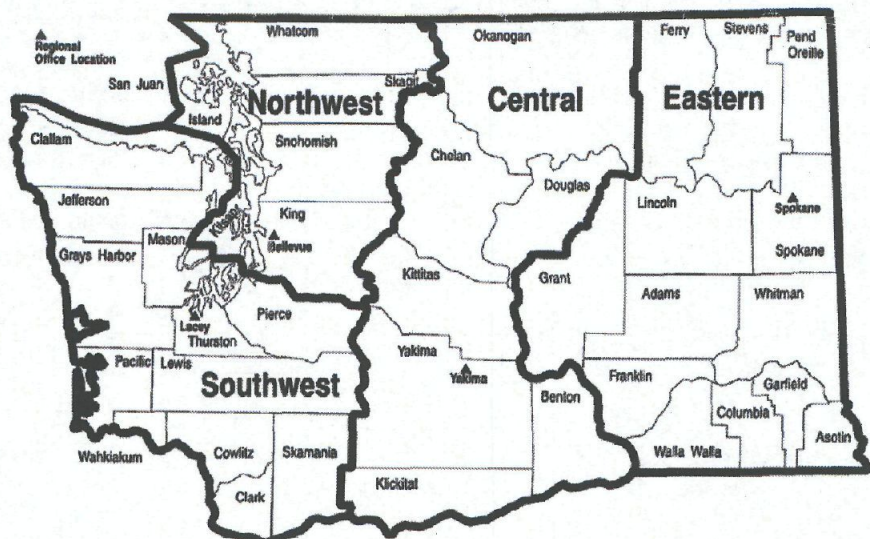
Date

Please check the region in which the project is located:

<p>*Submit your application to:</p> <p>DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611</p>	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 - 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



We encourage you to contact the Ecology Regional Office in your area to request a **pre-application conference** PRIOR to filing your application. Contacts are listed on the previous page. We will review your project needs and assist you in determining options for obtaining the water you need.

INSTRUCTIONS for the Application for a Water Right Permit

Please read these instructions carefully. Be accurate and complete in filling out your application, as the information you provide is very important in processing your application. Be sure to attach your fees, maps, and any additional information related to the water uses you are proposing.

If you need assistance, please contact the regional office in which your project will be located. A map of the Ecology regions is on the back page of the application. If your answers to any questions are longer than the space provided, you may attach additional sheets as necessary.

Check Boxes

Check the appropriate box for Surface or Ground Water.

Check the appropriate box for Permanent, Temporary, Drought, or Short Term use (duration of 4 months or less).

***Application Fee**

- A minimum fee of \$50.00 is required for each new application for a water right permit.
- No fees are required for applications to be processed under a Cost Reimbursement contract.
- No fees are required for Emergency Drought Applications (only when a drought is declared).

If additional fees are required, Ecology will send you a letter requesting those fees. If you are unsure of the appropriate fee amount, contact your regional office for more information, or visit our website:

<http://www.ecy.wa.gov/programs/wr/rights/wr_fees.html>.

Please make checks or money orders payable to the "Department of Ecology." Cash cannot be accepted. ALL FEES ARE NONREFUNDABLE.

Section 1. APPLICANT

Enter the name of the person, organization, or water system for which the water right permit is requested. For instance, if the permit is required for a community water system, enter the name of the system (e.g. Green Acres Water Works). Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if you have one).

Provide the name of a contact person (if different from above) to call in case we have questions about the application or proposed project. Describe the relationship of the contact person to the applicant, e.g. "consultant," "water systems engineer," "realtor," "chair of community well organization," etc.

Enter the name of the legal or part owner (person or business) of the land where the water is to be used. Enter a mailing address, including zip, daytime telephone, an alternate or cell phone number, and an Email address (if available).

Section 2. STATEMENT OF INTENT

Mark the check box if you own the land containing the proposed point of diversion/withdrawal.

Mark the check box if you have legal authority to make this application for use of another's land.

Provide a brief description of the purpose of your proposed project and the anticipated length of time to complete the project.